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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)Docket Number (Optional)
PQC-199US

In re Application of Timothy D. Evans et al.

Application Number 09/700,475

Filed January 11, 2001

For PEROXIDE, OXYGEN, AND PEROXIDE/OXYGEN
BRIGHTENING OF CHEMICAL AND MIXED WASTE PULPSGroup Art Unit
1731 Examiner
 Marc S. Alvo**RECEIVED**
MAY 20 2003
FC 1700

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response in the above identified application. I am the attorney or agent of record.

The requested extension and appropriate non-small-entity fee are as follows
(check time period desired):

- | | |
|---|----------|
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1)) | \$ _____ |
| <input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2)) | \$410.00 |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) | \$ _____ |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) | \$ _____ |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) | \$ _____ |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____. | |
| <input checked="" type="checkbox"/> A check in the amount of the fee is enclosed. | |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. | |
| <input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account. | |
| <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>18-0350</u> . | |

I have enclosed a duplicate copy of this sheet.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

Name (Print/Type)	Christopher R. Lewis	Registration No. (Attorney/Agent)	36,201
Signature		Date	May 13, 2003

CERTIFICATE OF MAILING OR TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below.

Name (Print/Type)	Christopher R. Lewis	Date	May 13, 2003
Signature		Date	May 13, 2003

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

- *Total of _____ forms are submitted.

Burden Hour Statement: This form is estimated to take 0.1 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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